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Fill in this information to identify your case:	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

OCT 30 2017

JEFFREY P. ALLSTEADT, CLERK
INTAKE 1

Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Sharnell	
	government-issued picture identification (for example,	First name	First name
	your driver's license or	May	
	passport).	Middle name	Middle name
	Bring your picture	Lawrence	
	identification to your meeting with the trustee.	Last name	Last name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8	Pirst name	First name
	years		
	Include your married or maiden names.	Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
ediyida da	r akkyn ha do thibat dalah kucas mininka bi 4-250 menungan penganya ara bi 4 mininka kali a dalamat		
3.	Only the last 4 digits of your Social Security	xxx - xx - <u>0</u> <u>7</u> <u>5</u> <u>1</u>	xxx - xx
	number or federal	OR	OR
	Individual Taxpayer Identification number (ITIN)	9 xx - xx	9 xx - xx

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Case number (if known)

Sharnell M.

Debtor 1

Lawrence

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. ☐ I have not used any business names or EINs. and Employer **Identification Numbers** (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name EIN EIN If Debtor 2 lives at a different address: 5. Where you live 608 Thornwood Drive Number Street Number Street South Holland IL. 60473 City State ZIP Code State ZIP Code Cook County County If Debtor 2's mailing address is different from If your mailing address is different from the one above, fill it in here. Note that the court will send yours, fill it in here. Note that the court will send any notices to this mailing address. any notices to you at this mailing address. Number Street Number Street P.O. Box P.O. Box City ZIP Code City State ZIP Code State Check one: Check one: 6. Why you are choosing this district to file for Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, bankruptcy I have lived in this district longer than in any I have lived in this district longer than in any other district. other district. I have another reason. Explain. ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) (See 28 U.S.C. § 1408.)

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Case number (if known)_

Sharnell M. Lawrence

Debtor 1

Pa	nrt 2: Tell the Court Abo	ut Your B	ankrup	tcy Case					
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	are choosing to file under	☑ Cha	oter 7						
	ander	☐ Chapter 11 ☐ Chapter 12							
		☐ Cha	oter 13		sun-Ameri	- Martin (collabora especie) (felliorità (ilipeda) (felliorità)	O NORSK TORIET HASION MAINT ALLINON OF KICK-SAMPLEY HATES SYSTEM (CONTROL TO SUPERANCE AND MAINTENANCH AND		
8.	How you will pay the fee	☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.							
		☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).							
		By la less pay	iw, a jud than 15 the fee	lge may, but is not required to 0% of the official poverty line t	, wa that this	ive your fee, a applies to you option, you m	ion only if you are filing for Chapter 7. and may do so only if your income is in family size and you are unable to just fill out the Application to Have the with your petition.		
Have you filed for bankruptcy within the	☑ No	Diatriot	Whe			Case number			
	last 8 years?	was res.	DISTRICT	VIIIC		MM / DD / YYYY	- Case Hallion		
			District	When		M/ DD/YYYY	Case number		
			District	When	n _		Case number		
10.	Are any bankruptcy	☑ No				114 - 5 5 6 4 11 4 11 4 5 11 4 5 11 4 5 11 4 5 1 5 1			
	cases pending or being filed by a spouse who is	_	Debtor				Relationship to you		
	not filing this case with you, or by a business partner, or by an affiliate?		District	Whet		IM / DD / YYYY	Case number, if known		
	annater		Debtor				Relationship to you		
			District	When	n _	IM / DD / YYYY	Case number, if known		
11.	Do you rent your residence?	☑ No. ☐ Yes.	Go to li Has you	ır landlord obtained an eviction jud	dgm	ent against you	and do you want to stay in your		
			☐ Yes	Go to line 12. Fill out <i>Initial Statement About ai</i> bankruptcy petilion.		iction Judgment	t Against You (Form 101A) and file it with		

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Debtor 1 Sharnell		Lawr	Lawrence Case number (if known)					
Debtor 1	First Name Middle Nam	e	Last Name	······	(
	I_	·	V 0 0-	i. P				
Part 3:	Report About Any E	usiness	es You Own as a So	le Proprietor				
	you a sole proprietor	🛭 No. C	3o to Part 4.					
	ny full- or part-time ness?	☐ Yes	Name and location of bu	siness				
	e proprietorship is a							
	ess you operate as an		Al				The Table of the Control of the Cont	
	dual, and is not a		Name of business, if any					
	rate legal entity such as poration, partnership, or				······································			
LLC.			Number Street					
	have more than one							
	sole proprietorship, use a separate sheet and attach it							
	s petition.		Ch.	······································	State	ZIP Code		
			City		State	ZIF Code		
								
			Check the appropriate be	-				
			Health Care Busines	•	•			
			☐ Single Asset Real Es	state (as defined	in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as defin	ned in 11 U.S.C.	§ 101(53A))			
			☐ Commodity Broker (a	as defined in 11	U.S.C. § 101(6))			
			■ None of the above					
Bank are y debt For a busin	definition of <i>small</i> ess debtor, see S.C. § 101(51D).	most recany of the	appropriate deadlines. If yent balance sheet, stater less documents do not extend a mot filing under Chapter the Bankruptcy Code. I am filing under Chapter the Bankruptcy Code. I am filing under Chapter Bankruptcy Code.	ment of operatio kist, follow the properties of the pter 11. · 11, but I am NC · 11 and I am a s	ns, cash-flow statement, rocedure in 11 U.S.C. § OT a small business deb	and federal inconstance and federal inconstance and the federal federa	ome tax return or if the definition in efinition in the	
	ou own or have any erty that poses or is	∠ No						
	ed to pose a threat	Yes.	What is the hazard?			····		
	minent and							
	ifiable hazard to							
	c health or safety? o you own any							
	erty that needs		If immediate attention is	needed why is	it needed?			
imme	ediate attention?		IT ITHINGUISIC GROTIESTI	s riceaca, willy in				
	cample, do you own			*heritanta viscouri				
that m	pable goods, or livestock nust be fed, or a building							
that n	eeds urgent repairs?							
			Where is the property?	Number	Street		**	
					~ · · · · ·			
				City		State	ZIP Code	

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Debtor 1

Sharnell M. Lawrence

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Abou	t	De	b	to	۲1	:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required	to receive a briefi	ng about
credit counseling	because of:	

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to	receive	а	briefing	about
cred	iit co	ounseling	j bi	ecause	of	:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 **Answer These Questions for Reporting Purposes** Part 6: 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts do as "incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under ■ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and 🔲 No administrative expenses Yes are paid that funds will be available for distribution to unsecured creditors? 25,001-50,000 **2** 1-49 1,000-5,000 18. How many creditors do you estimate that you 50,001-100,000 5,001-10,000 50-99 owe? ☐ More than 100,000 10,001-25,000 100-199 200-999 \$500,000,001-\$1 billion **2** \$0-\$50,000 \$1,000,001-\$10 million 19. How much do you \$1,000,000,001-\$10 billion \$10,000,001-\$50 million estimate your assets to \$50.001-\$100.000 \$10,000,000,001-\$50 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million ■ More than \$50 billion □ \$500,001-\$1 million \$100.000.001-\$500 million \$500,000,001-\$1 billion ■ \$1,000,001-\$10 million \$0-\$50,000 20. How much do you estimate your liabilities ■ \$1,000,000,001-\$10 billion \$10,000,001-\$50 million \$50,001-\$100,000 \$10,000,000,001-\$50 billion to be? \$100,001-\$500,000 \$50,000,001-\$100 million ☐ More than \$50 billion \$100,000,001-\$500 million \$500,001-\$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. aucel × 10-25-17 Executed on _ MM / DD /YYYY

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Page 7 of 51 Document Sharnell Μ. Lawrence Debtor 1 Case number (it known) The law allows you, as an individual, to represent yourself in bankruptcy court, but you For you if you are filing this bankruptcy without an should understand that many people find it extremely difficult to represent attorney themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney. If you are represented by To be successful, you must correctly file and handle your bankruptcy case. The rules are very an attorney, you do not technical, and a mistake or inaction may affect your rights. For example, your case may be need to file this page. dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay. You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned. If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply. Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences? ☐ No Z Yes Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned? ☐ No Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms? Z No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

> Date Date MM / DD / YYYY Contact phone Contact phone (708) 224-7557 Cell phone Cell phone Email address Fmail address

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Debtor 1	Sharnell	Мау	Lawrence	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court fo	r the: Northern Distric	of Illinois	X.
Case number				
	(If known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Summarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	. \$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	. \$ 23,347.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 23,347.00
Summarize Your Liabilities	
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your liabilities Amount you owe
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$116,149.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 31,868.00
Your total liabilities	\$ 148,017.00
7189 Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,698.00
Schedule J: Your Expenses (Official Form 106J)	¢ 1.679.00

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Sharnell May Lawrence Debtor 1 Case number (if known)_ First Name Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 2 Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 2,900.00 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 0.00 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 0.00 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.) 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) 0.00 0.00 9g. Total. Add lines 9a through 9f.

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Fill in this information to identify your case:	
Debtor 1 Sharnell May Lawrence First Name Middle Name Last Name Debtor 2 (Spouse, if filling) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois Case number (If known)	☐ Check if this is an
Official Form 106Dec Declaration About an Individual Debtor's Schedules	amended filing

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
. Attach Bankruptcy Petition Preparer's Notice, Declaration, and	
Signature (Official Form 119).	
hedules filed with this declaration and	
or 2	
0.2	
	hedules filed with this declaration and

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		wrence
First Name	Middle Name	Last Name
r 2		
se, if filing) First Name	Middle Name	Last Name
•	Middle Name t for the: Northern District of II	

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In Part 1: 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D. 608 Thornwood Drive Creditors Who Have Claims Secured by Property. Duplex or multi-unit building Street address, if available, or other description ☐ Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land 116,149,00 0.00 Investment property South Holland IL 60473 ☐ Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Fee Simple Debtor 1 only Cook Debtor 2 only County ☐ Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Street address, if available, or other description Condominium or cooperative Current value of the Current value of the Manufactured or mobile home entire property? portion you own? Land Investment property ☐ Timeshare Describe the nature of your ownership City State ZIP Code interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number:

Case 17-32413 Doc 1 Filed 10/30/17 Entered 10/30/17 13:44:01 Desc Main Document Page 12 of 51 Sharnell May Lawrence Debtor 1 First Name Middle Nam What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership City State ZIP Code ☐ Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ✓ Yes Nissan Who has an interest in the property? Check one. Make: 3.1 Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Maxima Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2005 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? Approximate mileage: portion you own? At least one of the debtors and another Other information: 2,000.00 2.000.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the portion you own? entire property? Approximate mileage: At least one of the debtors and another Other information:

instructions)

Check if this is community property (see

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Debtor 1	Sharnell First Name	May Middle Name	Document Lawrence	Page 13 of 51 Case number (if known)	

Model: Year: Approximate mileage: Other information:	Debtor 1 only Debtor 2 only		
Approximate mileage:	· · · · · · · · · · · · · · · · · · ·	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D ims Secured by Property
	The second secon	Current value of the	Current value of t
Other information:	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
A	At least one or the debtors and another		· -
7110000	Check if this is community property (see instructions)	\$	\$
4. Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	
Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	
Year:	Debtor 2 only	Current value of the	
Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of t portion you own?
Other information:	At least one of the debtors and another		
	Check if this is community property (see instructions)	\$	\$
Yes Make:	Who has an interest in the property? Check one.	Do not deduct secured de	
	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Pu d claims on <i>Schedule L</i> ns Secured by Property
Make: Modeł: Year:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Clain Current value of the	aims or exemptions. Pud claims on Schedule lens Secured by Propert Current value of
Make: Model: Year:	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the entire property?	aims or exemptions. Pud claims on Schedule I d claims on Schedule I ns Secured by Property Current value of the portion you own?
Make: Model: Year: Other information: u own or have more than o	Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Debtor 1 only Debtor 2 only One, list here:	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured cla	aims or exemptions. Pud claims on Schedule Ins Secured by Property Current value of a portion you own? \$
Make: Model: Year: Other information:	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) one, list here: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any secured Creditors Who Have Clain Current value of the entire property? \$	aims or exemptions. Pud claims on Schedule Lins Secured by Property Current value of the portion you own? \$
Make: Model: Year: Other information:	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) one, list here: Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured class the amount of any secured Creditors Who Have Claim	aims or exemptions. Pud claims on Schedule Lins Secured by Property Current value of a portion you own? \$
Make: Model: Year: Other information: u own or have more than of Make: Model:	Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) one, list here: Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any securer. Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clathe amount of any securer.	aims or exemptions. Pud claims on Schedule Ins Secured by Propert Current value of portion you own? \$

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Debtor 1

Sharnell First Name

May Middle Name Lawrence

Case number (if known)_

Describe Your Personal and Household Items

Do		egal or equitable interest in any of the following items?	Current value portion you o Do not deduct se or exemptions.	wn?
6.	Household goods and	-		
		nces, furniture, linens, china, kitchenware		
	No Yes. Describe		\$	500.00
7.	Electronics		J	
	collections; e	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music electronic devices including cell phones, cameras, media players, games		
	No Yes. Describe		\$	150.00
8.	Collectibles of value Examples: Antiques and stamp, coin.	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles	\$ 	
	☑ No ☐ Yes. Describe		\$	
	Equipment for sports a Examples: Sports, photo and kayaks; o	nd hobbies egraphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
	No Yes. Describe		\$	
	☑ No	shotguns, ammunition, and related equipment		
	Yes. Describe		\$	
	Clothes Examples: Everyday clot □ No	hes, furs, leather coats, designer wear, shoes, accessories	i	
	Yes. Describe	Clothes	\$	300.00
	Jeweiry Examples: Everyday jewegold, silver ☑ No □ Yes. Describe	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	\$	
3.	Non-farm animals		4	
	Examples: Dogs, cats, bi No	rds, norses		
	Yes. Describe		\$	
		household items you did not already list, including any health aids you did not list		
	No ,			
ļ	Yes. Give specific information		\$	***************************************
5. /	Add the dollar value of a for Part 3. Write that number	all of your entries from Part 3, including any entries for pages you have attached mber here	\$	950.00

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Debtor 1

Sharnell First Name

Мау Middle Name

Lawrence

Case number (if known)_

Do you own or have any	legal or equitable interest in	any of the following?		Current valu portion you Do not deduct sor exemptions.	own? secured claims
16. Cash <i>Examples:</i> Money you	have in your wallet, in your hor	ne, in a safe deposit box, and on hand wh	en you file your petition		
☑ No					
☐ Yes			···· Cash:	· \$	
and other s	savings, or other financial accou imilar institutions. If you have π	unts; certificates of deposit; shares in credi aultiple accounts with the same institution,	it unions, brokerage houses list each.	3,	
☐ No ☑ Yes		Institution name:			
		insuluron name:			
	17.1. Checking account:	US Bank		. \$	0.00
	17.2. Checking account:			. \$	
	17,3. Savings account:	US Bank		. \$	0.00
	17.4. Savings account:	<u></u>		\$	
	17.5. Certificates of deposit:			\$	-
	17.6. Other financial account:				
	17.7. Other financial account:				
	17.8. Other financial account:				
	17.9. Other financial account:			T	
				Ψ	
	or publicly traded stocks investment accounts with broke Institution or issuer name:	erage firms, money market accounts		. \$	
				. \$	
	The state of the s			- \$	
an LLC, partnership, a	tock and interests in incorpor and joint venture Name of entity:	rated and unincorporated businesses, i	ncluding an interest in % of ownership:		
Yes. Give specific information about			0% %	\$	
them	***************************************		0% %	\$	
			0% %	•	

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2. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notions, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. I security for Science specific information about them. S S S S S S S S S S S S S S S S S S S	Debtor 1	Sharnell First Name	May	Lawrence	Case number (if known)	
Negotible instrument and corporate bonds and other negotiable and non-negotiable instruments Negotible instruments include personal checks, cashiers' checks, promiscory notes, and money orders. Negotible instruments are those you cannot transfer to someone by signing or delivering them. Negotible instruments are those you cannot transfer to someone by signing or delivering them. No Yes Sive specific information about them. S S S		FRSI NAME	Middle Name	Lasi Name		
Negatible instruments include personal clarecks, cashiers' checks, promiseory notes, and money unders. Note regardable instruments are those you cannot transfer to someone by signing or delivering them. Note have been as the second transfer to someone by signing or delivering them. Note have been as the second transfer to someone by signing or delivering them. Suser name. Information about them			A state of the second	**	(x,y) = (x,y) + (x,y	
Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-regotiable instruments are those you cannot transfer to someone by slighing or delivering them. No Security deposits assert as the second of the s	. Governi	ment and corp	orate bonds and oti	ner negotiable and non-neg	otiable instruments	
No	Negotial	ble instruments	include personal che	cks, cashiers' checks, promis	SSOTV notes, and money orders	
Ves. Sieve specific information about them		jouapie instrumi	ents are those you ca	innot transfer to someone by	signing or delivering them.	
information about them						
Retirement or pension accounts Examples: interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans. No Yes, List each account separately. Type of account. Institution name: 401(k) or similar plans: 401(k) or similar plans: 401(k) Pansion plan: 18A: Retirement account: Keogh. Additional account: Add			Issuer name;			
Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No No No No Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No No Institution name or individual: Electric: Gas: Heating oit: Security deposits on or thers Nour institution name or individual: Electric: Gas: Heating oit: Security deposit or rontal unit: Prepaid rent: Tolephone: Namulaties (A contract for a periodic payment of money to you, either for life or for a number of years) No No Institution rame and description:	them					\$
Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: 401(k)						\$
Exemples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No						\$
Exemples: Interests in IRA, ERISA, Keogh, 401 (k), 403(b), firiff savings accounts, or other pension or profit-sharing plans No No No No No No No No No No No No N	Datirom	ant ar namalan				
No Yes. List each account separately. Type of account. Institution name: 401K \$ 20,397.0 401K \$ 20,397.0 \$ 20,397.0 401K \$ 20,397.0 \$ 20,397.0 Pension plan: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$				01(k), 403(b), thrift savings a	ccounts or other pension or profit-charing plans	
Yes_List each account separately. Type of account: Institution name: 401(x) or similar plan: 401(x) Pension plan: \$ 20,397.0 Pension plan: \$ \$ 20,397.0 Retirement account: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$, , , , , , ,	- · (· ·// · · · · · (· · // · · · · · ·	occurred perison of pront-sharing plans	
401(k) or similar plan: Pension plan:						
Pension plan: RA:	acco	unt separately.	Type of account:	Institution name:		
IRA: Retirement account: Keogh: Additional account: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No Yes			401(k) or similar plan:	401K		\$20,397.0
RA: S Retirement account: S S Retirement account: S S S S S S S S S			Pension plan:			\$
Retirement account: Keogh: Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No Yes. Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Sender of a periodic payment of money to you, either for life or for a number of years) No Issuer name and description:			IRA:			œ.
Keogh: Additional account: Sadditional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No No Institution name or individual: Electric: Gas: Heating oi: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Samulaties (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes			Retirement account:			
Additional account: Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Yes Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Samulatities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description:						
Additional account: Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No No Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Summuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes			-			
Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Summulties (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes						\$
Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications No Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: Sanutities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description:			Additional account:			\$
Electric: \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Example: companie	s: Agreements v	deposits you have m with landlords, prepai	ade so that you may continu d rent, public utilities (electric	e service or use from a company , gas, water), telecommunications	
Electric:	Yes		Ins	titution name or individual:		
Gas: Heating oil: Security deposit on rental unit: Security deposi						•
Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: S Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Yes			Gas:			•
Security deposit on rental unit: Prepaid rent:			Heating oil:			_
Prepaid rent: Telephone: Water: Rented furniture: Other: Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Yes			Security deposit on ren	tal unit:		_
Telephone: Water: Rented furniture: Other: S Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Yes						
Water: Rented furniture: Other: S			Telephone:			\$
Rented furniture: Other: S			Water:			_
Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes			Rented furniture:			
Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) V No Ves			Other:			
No Yes						\$
No Yes	Annisities	(A contract for	a períodic payment a	f manay ta yay, aithar for life		
Yes		(1100111111001101	a penodio payment c	i money to you, either tor me	or for a number of years)	
<u> </u>			leguer name and de-	ription:		
	153	****************	reader Hairle and desc	inpuon:		
<u> </u>						

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Debtor 1

Sharnell

May

Lawrence

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Desc Main

Case number (# known) First Name Middle Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ✓ No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☑ No Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No Yes. Give specific information about them... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **Ø** No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ✓ No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No No Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else **Z** No ☐ Yes. Give specific information......

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Debtor 1

Sharnell First Name

May

Middle Name

Lawrence

Case number (if known)_

31. Interests in insurance policies		·	•
	re: health savings account (H	SA); credit, homeowner's, or renter's insurance	
☑ No	e, neam carings account (11	on, creat, nomeowiters, or resters insurance	
T Vos. Nama tha incurance company	Сотралу пате:	Beneficiary:	Surrender or refund value:
, ,			\$
			φ
			\$
			\$
32. Any interest in property that is due you if if you are the beneficiary of a living trust, exproperty because someone has died. No	pect proceeds from a life insu	rrance policy, or are currently entitled to receive	
☐ Yes, Give specific information	and a second definitely of a second or second or second or section (second or second o		
			\$
33 Claims against third narties, whether are			······································
33. Claims against third parties, whether or I Examples: Accidents, employment disputes	iot you have filed a lawsuit , insurance claims, or rights fo	or made a demand for payment	
☑ No	_		
Yes. Describe each claim.	THE PROPERTY OF THE PROPERTY O		3
*	Committee of the commit	10 and 1	\$
34. Other contingent and unliquidated claims	of every nature, including	counterclaims of the debtor and rights	
to set off claims		•	
No	the about the transfer of the territories and the contract of		The tracking of the state of th
Yes. Describe each claim			¢
Nervos.	e regence as a service de de de la		φ
35. Any financial assets you did not already l	ist		
2 No	et en som en men et en om en		
Yes. Give specific information			S
l	territari talah merupakan sebah s		***************************************
36. Add the dollar value of all of your entries	from Part 4, including any	entries for pages you have attached	
for Part 4. Write that number here		→	\$0.00
Part 5: Describe Any Business-R	elated Property You (Own or Have an interest in. List any i	wood nododa tu Naud d
	onaccu rioperty rou (on to make an interest in. List any	rear estate in Part 1.
37. Do you own or have any legal or equitable	interest in any business-re	elated property?	
No. Go to Part 6.			
Yes. Go to line 38.			
			Current value of the
			portion you own?
			Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions you	olyopady, compad		or exemptions,
No	aiready earned		
Yes. Describe	er til frakt meller i manne, greg i sjæret til forskalt fillsadig er forsjære på sjæret i sjæret i stæret i skrekerbælde.		%*************************************
			\$
39. Office equipment, furnishings, and suppli	tide construction on the section of the control of	THE RESERVE THE PARTY OF THE PA	
		chines, rugs, telephones, desks, chairs, electronic devices	•
2 No	F 2) Sobiolo! Ida IIId		•
☐ Yes. Describe	an negaring geografis, man aphagas bayan yayan ga manasan jagyan yayan ya wasan ngabam		
to the other property and provide the state of the state	t to the time of the contract of the time to the time of the sign of the time of the sign of the time of time of time of the time of time	100 100 100 100 100 100 100 100 100 100	\$
	and a feedback	The state of the s	

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Debtor 1	Sharnell	May	Lawrence	Case number (if known)		
	First Name	Middle Name	Last Name	Case Harribes (#xnown)		
40. Machin	ery, fixtures, e	quipment, supp	lies you use in business, and too	s of your trade		
1 No						
☐ Yes	s. Describe	1 1 1 1 1 1 1 1 1 1			e e	
		tradelite an exercic la participa de proposition de proposition de la companya de proposition de la companya d		· · · · · · · · · · · · · · · · · · ·		
41. Invento No	ory 					
	. Describe		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		dr.	
		. 14				
40 i nternet	la la nautoanale					
42. mteresi Marina	is in partnersn	ips or joint vent	cures			
	Describe					
	. Describe	Name of entity:		% of ownersh	ip:	
				%	\$	
				%	\$	
		*		%	\$	
43 Custom	ner lists mailin	ig lists, or other	compilations			
₽ No	iei nata, meiiii	ig nata, or other	Compilations			
Yes	. Do your lists	include person	ally identifiable information (as de	fined in 11 U.S.C. § 101(41A))?		
	□ No			,,		
	Yes. Desc	ribe		amananan mahanda hakkit 1575-557 1741 ayayaya tasan manan manan mahibistika 1700 manan manan m	, view	
		-			\$	
(Amushus	nimana unimend					
#4. Arry bu:	siriess-relateu	property you di	d not already list			
	. Give specific					
	rmation				\$	
					\$	
					\$	
					\$	
					\$	
					Φ	*****
					\$	
15. Add the	dollar value o	of all of your ent	ries from Part 5, including any en	ries for pages you have attached		0.00
tor Part	5. Write that r	iumber here			→	
			-			
resolution v	_					
Part 6:	If you own or	ny Farm- and (have an interes	Commercial Fishing-Related F it in farmland, list it in Part 1.	roperty You Own or Have an Intere	st In.	
	,					
6. Do you	own or have a	ny legal or equi	table interest in any farm- or com	nercial fishing-related property?		
	Go to Part 7.	,	•	,		
Yes.	Go to line 47.					
					Current value	of the
					portion you o	
					Do not deduct se or exemptions.	ecured claims
7. Farm ar					p	
	es: Livestock, p	oultry, farm-raise	d fish			
☑ No		A.A.A.A.A.A.				
∟ Yes			The state of the s			
					\$	0.00
	i	v			· • • • • • • • • • • • • • • • • • • •	

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Debtor 1

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Case number (if known)

Deptor i	First Name Middle Name	Lest Name	***************************************	C	Case number (if known)		
48. Crops-	either growing or harvested	d					
☑ No		otta diki dili dili diligilik paga assar mga angan nga anga ga angan anga angan sa da da sa da da sa da sa da s	anne en la calendar de la calendar d	**************************************	and the same the same the same to be a same to be a same to be successful and the same to be successful as a s		
Yes. infor	Give specific nation					\$	
49. Farm an No	d fishing equipment, impler	ments, machinery, fixtu	res, and tools	of trade			
		- ny ny many taona min'ny avoira dia 62.00 to 1900, ny dipondronin'i proprinty a tronsmilla si estimatronisment di	and the second statement of the second statement of the second second second second second second second second	A TANKE TO A SECURITION OF THE PARTY OF THE	родин (тар богу фоскования филоборб (Москова) и пред у устану у устану достоборб (Москова) и пред образования пред		
		ta di				\$ <u></u>	
50. Farm an	d fishing supplies, chemica						
Ø No							
☐ Yes					2011	1	
		od				\$	
51. Any farm No	ı- and commercial fishing-r	elated property you did	not already lis	st			
Yes.	Give specific	ands thrown As playing group groups and the second	Hibbar of Sametra ark as of parameters as filter (1, 1,27%).	Contrata con combinati de describir co describir con escribir de la contrata con escribir de la contrata del contrata de la contrata de la contrata del contrata de la contrata del la contrata de la contrata del la contrata de la co		of the same of the	
inforr	nation	P 11 4 3 5 4 1 4 1 5 1 4 1 4 1 4 1 4 1 4 1 4 1 4			and the state of t	\$	
52. Add the	dollar value of all of your e	ntries from Part 6, inclu	iding any entri	es for pages	you have attached	s	0.00
for Part	6. Write that number here					L	
Part 7:	Describe All Property	/ You Own or Have	an Interes	st in That \	You Did Not List Abov	'e	
53 Do you h	nave other property of any i	rind you did not alreads	/ liet?				
	Season tickets, country club mer	mbership	•				
☑ No	1 to 4 th Aud 1 to Aura and a sure a sure and a sure a sure and a sure a sure and a sure					ø	
	Give specific nation					\$\$	
					villares or common	\$ \$	***************************************
	December of the state of the st	tin kanana di danana kanana ang kanana anana anana anana anana anana kanana anana anana anana anana anana anan			\$ \$400000000000000000000000000000000000		
54. Add the o	dollar value of all of your en	itries from Part 7. Write	that number h	nere		\$	0.00
				1.00	the state of the s		
Part 8:	List the Totals of Eac	h Part of this Forr	n				
55. Part 1: To	otal real estate, line 2		•••••••••••••••••••••••••••••••••••••••	0		→ \$	0.00
56. Part 2: To	otal vehicles, line 5		\$	2,000.00		-	÷
57. Part 3: To	otal personal and household	d items, line 15	\$	950.00			
58. Part 4: To	tal financial assets, line 36	i	\$	20,397.00			
59. Part 5: To	tal business-related proper	rty, line 45	\$	0.00			
60. Part 6: To	tal farm- and fishing-relate	d property, line 52	\$	0.00			
61. Part 7: To	tal other property not listed	d, line 54	+\$	0.00			
62. Total pers	sonal property. Add lines 56	through 61,	. \$	23,347.00	Copy personal property total •	→ +¢	23,347.00
					. , ,	Ψ	
63. Total of a	II property on Schedule A/E	3. Add line 55 + line 62				¢	23,347.00
	1 - 1 A AF				***************************************	Φ	, , , , , ,

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First Name Middle Name Last N OF 2	
or 2	t Name
use, if filing) First Name Middle Name Last N	t Name
ed States Bankruptcy Court for the: Northern District of Illinois	

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

You are o	f exemptions are you claiming? claiming state and federal nonbar claiming federal exemptions. 11 to	nkruptcy exemptions, 11		
2. For any prop	perty you list on Schedule A/B		pt, fill in the information below.	
Brief descri	ption of the property and line on /B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.	
Brief description:	Single Family Home	\$0.00	☑ \$ <u>30,000.00</u>	735 ILCS 5/12-901
Line from Schedule A/L	3. 1.1		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Auto	\$2,000.00	Ø \$ 2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/E	3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:	Household Goods	\$500.00	□ \$ 500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/E	3: <u>6</u>		■ 100% of fair market value, up to any applicable statutory limit	
3. Are you clair	ning a homestead exemption o			
	Buotmont on 4/04/40 and area	ware ofter that for annual	s flied on or after the date of adjustment.)	

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Debtor 1

Sharnell

May

Last Name

Lawrence

Case number (if known)_

Part 2:

Additional Page

	ion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	Electronics	\$150.00	□ \$ 150.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	7		100% of fair market value, up to any applicable statutory limit	·
Brief description:	Clothes	\$300.00	□ \$ <u>300.00</u>	735 ILCS 5/12-1001(a)
Line from Schedule A/B:	11		100% of fair market value, up to any applicable statutory limit	
Brief description:	Checking/Saving Acc	\$	Q \$0.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B:	17		100% of fair market value, up to any applicable statutory limit	
Brief description:	Retirement/Pension	\$	<u>u</u> \$	735 ILCS 5/12-1006
Line from Schedule A/B;	21		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	•	
Line from Schedule A/B;			☐ 100% of fair market value, up to any applicable statutory limit	-
Brief description:	-	\$	\$	
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	Q \$	
Line from Schedule A/B:	The state of the s		☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	
Brief description:		\$		
Line from Schedule A/B:			☐ 100% of fair market value, up to any applicable statutory limit	
Brief description:		\$	□ \$	
Line from Schedule A/B:			100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your ca	Se:			
Debtor 1 Sharnell May				
First Name Middle				
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number	- Existing - Existing - Existing - Existing - Existing - Existence			
(If known)				if this is an
			amend	ed filing
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Prop	erty	12/15
Be as complete and accurate as possible	. If two married people are filing together, both are e	qually responsible fo	or supplying correc	t
additional pages, write your name and ca	ly the Additional Page, fill it out, number the entries.	and attach it to this	form. On the top of	any
	,			
Do any creditors have claims secured I No. Check this hox and submit this for	oy your property? m to the court with your other schedules. You have noth	ina alaa ka	ne. e.	
Yes. Fill in all of the information below		ing else to report on t	nis torm.	
Part 11 List All Secured Claims				
2. List all secured claims. If a creditor has r	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor h	nas a particular claim, list the other creditors in Part 2.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
As much as possible, list the claims in alpi	nabetical order according to the creditor's name.	value of collateral.	claim	Ifany
2.1 M & T Bank	Describe the property that secures the claim:	_{\$_} 116,149.00	\$ 116,149.00 g	0.00
Creditor's Name	Single Family Home		1	
1 Fountain PLZ Number Street	- I amily Florido			
	As of the date you file, the claim is: Check all that apply	_}		
Baffalo NY 14203	Contingent			
Baffalo NY 14203 City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.	•			
Debtor 1 only	Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt	Color (including a right to offset)			
Date debt was incurred 01/01/2016	Last 4 digits of account number 8 0 1 0			
	Describe the property that secures the claim:	\$	\$ \$	and visite construction of the second construction of the second construction of the second construction of the
Creditor's Name		Ψ	Ψ3	
Number Street		To the state of th		
Case.	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who owes the debt? Check one.	Disputed			
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit Other (including a right to offset)			
Check if this claim relates to a community debt	— Tariot (molading a right to Ottober)			
Date debt was incurred	Last 4 digits of account number			
	Column A on this page. Write that number here:	<u> </u>	ere e en commente de travellar de entranção desentados estados estados en electrones e esquel	properties and order to be a secure point of the security of t

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			Document	Page 24 of 51
Fill in this in	nformation to ide	ntify your case:		
Debtor 1	Sharnell	May	Lawrence	
	First Name	Middle Name	Last Name	de
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern District	of Illinois	
Case number (If known)			····	Check if this is amended filing
Official F	Form 106E	·/F		

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

needed, copy the any additional p	he Part you need, fill it out, number pages, write your name and case no	the entries in the boxes on the left. Attach the Contumber (if known).	inuatio	n Page to this	page. On the	top of
Part 1: List	All of Your PRIORITY Unsecur	red Claims				
✓ No. Go to ✓ Yes. 2. List all of you each claim li nonpriority al unsecured cl	our priority unsecured claims. If a consted, identify what type of claim it is. If mounts. As much as possible, list the laims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's report of the precision of the precision of the creditor had a particular claim instructions for this form in the instruction booklet.)	nat clair iame. If n, list th Tota	n here and sho you have more e other creditor	w both priority than two priors in Part 3. ority Nor	and
2,1		Last 4 digits of account number	\$			
Priority Credito	or's Name Street	When was the debt incurred?	3	0.00 \$	0.00 \$	0.00
City Who incurr Debtor 1	State ZIP Code red the debt? Check one. only	As of the date you file, the claim is: Check all that appl Contingent Unliquidated Disputed	¥			
At least o	only and Debtor 2 only one of the debtors and another f this claim is for a community debt a subject to offset?	Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated				
☐ No ☐ Yes		Other. Specify				
Priority Creditor	r's Name	Last 4 digits of account number When was the debt incurred?			0.00 \$	0.00
Number	State ZIP Code	As of the date you file, the claim is: Check all that apply Contingent Unliquidated	<i>t</i> .			
Debtor 1 Debtor 2 Debtor 1 At least o	•	 □ Disputed Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated 				
Is the claim No	subject to offset?	☐ Other. Specify				No.

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Debtor 1

Sharnell

May

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Desc Main

Part 2 **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? $oxed{\square}$ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Capital One Last 4 digits of account number 0 7 5 1 4,447,00 Nonpriority Creditor's Name 06/01/2011 When was the debt incurred? 15000 Capital One Dr. Number Street Richmond VA 23238 As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No No ☑ Other. Specify Credit Card ☐ Yes 500.00 Comenity Bank/Carsons Last 4 digits of account number 04/01/2017 Nonpriority Creditor's Name When was the debt incurred? 3100 Eastib Square PL Number As of the date you file, the claim is: Check all that apply. Columbus OH 43219 State ZIP Code Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Credit Card ☑ No Yes Comenity Bank/NWYRK&CO Last 4 digits of account number 0 7 5 1 957.00 Nonpriority Creditor's Name 04/01/2014 When was the debt incurred? 220 West Schrock Rock Number Street WESTERVILLE oh As of the date you file, the claim is: Check all that apply. State ZIP Code Contingent Who incurred the debt? Check one. ☐ Unliquidated Debtor 1 only ☐ Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another

ч	Check i	f this claim	is for a	community	debt
ls t	he clain	n subject to	offset?	•	

M No Yes Obligations arising out of a separation agreement or divorce that you did not report as priority claims plans, and other similar debts

_	nents to bene	or or pronesnaning p
M	Other, Specify	Charge Card

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Debtor 1

Sharnell First Name

May

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Part 2:

Middle Name

Your NONPRIORITY Unsecured Claims — Continuation Page

Comenity Bk/VICTORIASEC			Last 4 digits of account number 0 7 5 1	s 75	
Ionpriority Creditor's Name PO BOX 182789			When was the debt incurred? 08/01/2013	\$	
Number Street			As of the date you file, the claim is: Check all that apply.		
City	OH State	43218 ZIP Code	<u> </u>		
·		217 0006	☐ Contingent ☐ Unliquidated		
Who incurred the debt? Check	one.		Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			Other, Specify charge account		
v No □ Yes					
CONTROL OF	the V 6 F THE FOR THE STATE ST	er (1800-1804 blenda na selan-aalameri a represione) (1800-180) (1800-180)			
Credit One Bank			Last 4 digits of account number 4 7 9 6	\$ 1,45	
Nonpriority Creditor's Name			When was the debt incurred? 09/01/2011		
PO Box 98875 Number Street			Musell May rise debt lucdited \		
Las Vegas	NV	89193	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Alba innured the detag of			Unliquidated		
Who incurred the debt? Check of	ine.		☐ Disputed		
Debtor 1 only Debtor 2 only			Type of NONDRIODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and a	another		U Student loans		
☐ Check if this claim is for a c			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			☑ Other, Specify Credit Card		
☑ No ☑ Yes					
erroran dali cilmen e Laboraparo, mondi all'all'all'all'ancad de la lidica (iradicale e ancide la laborate antonome describe).	gant y new diest gestermingert die erhonen in termination de standig nederly between diester de standig nederly between diester die erhonen die erhone	tigg kalanturrak etar kabawanja dipubanjan jenjuh (o Lumurak de vandu	an Chand and shifted had also had a shimman had give should a shifted shifted a share a share and share a shifted had a shifted	¢ 600	
Kohls/Cap One Nonpriority Creditor's Name		***************************************	Last 4 digits of account number 9 3 0 5	Ψ	
N W 17000 Ridgewood D	r.		When was the debt incurred? 02/01/2017		
Menomonee Falls	WI	53051	As of the date you file, the claim is: Check all that apply.		
ity	State	ZIP Code	Contingent		
Who incurred the debt? Check o	no.		Unliquidated		
Debtor 1 only	116.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only					
At least one of the debtors and a	nother		Student loansObligations arising out of a separation agreement or divorce that		
Check if this claim is for a co	ommunity debt		you did not report as priority claims		
s the claim subject to offset?	y woot		Debts to pension or profit-sharing plans, and other similar debts		
Mo			Other. Specify Charge Account		
Yes					

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Case number (if known)_

Debtor 1

Sharnell First Name

May Middle Name

Lawrence

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Part 21 List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecu	red claims agains	st you?	
	No. You have nothing to report in this par	rt. Submit this form	to the court with your other schedules.	:
	Yes			
,	in the tradition of the second			:
4.	nonpriority unsecured claim, list the creditor	ns in the alphabe	tical order of the creditor who holds each claim. If a creditor has claim. For each claim listed, identify what type of claim it is. Do not	s more than one
	included in Part 1. If more than one creditor h	olds a particular c	i claim. For each claim listed, identify what type of claim it is. Do not laim, list the other creditors in Part 3.If you have more than three no	l list claims already
	claims fill out the Continuation Page of Part 2)	many not the dense of editors in Fart our you have more than three no	arphonity unsecured
	- ·			TO SERVICE A AND SERVICE A SERVICE AND SER
	1			Total claim
	SYNCB/JCP		Last 4 digits of account number 0 8 8 9	
	Nonpriority Creditor's Name			\$ 2,534.00
	PO Box 965007		When was the debt incurred? 09/01/2011	
	Number Street			
	Orlando FL	32896		
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
			,,,,	
	Who incurred the debt? Check one.		Contingent	
			Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community d	eht	Obligations arising out of a separation agreement or divorce	;
		CDI	that you did not report as priority claims	İ
	is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	ı
	No No		✓ Other Specify Credit Card	
	☐ Yes		· · · · · · · · · · · · · · · · · · ·	
	SYNCB/OLD NAVY		Last 4 digits of account number 1 8 5 9	\$2,758.00
	Nonpriority Creditor's Name		When was the debt incurred?	
	PO Box 32896			
	Number Street			
	Orlando FL.	32896	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code	☐ Contingent	
	Million for accounted the collection of		Unliquidated	
	Who incurred the debt? Check one.		Disputed	:
	Debtor 1 only		La Disputed	
	Debtor 2 only		Type of NONDRIODITY	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	☐ Check if this claim is for a community de	aht	Obligations arising out of a separation agreement or divorce	:
	•	301	that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	☑ No		Other. Specify Credit Card	
	☐ Yes			
<u> </u>		Coffee, was prosper as the segment to be confined by the Coffee of the C		
	SYNCB/TJX COS Nonpriority Creditor's Name		Last 4 digits of account number 4 5 8 5	s 616.00
			When was the debt incurred? 07/01/2016	\$ 0.000
	PO Bpx 965005		AMONDA AND AND AND AND AND AND AND AND AND	
	Number Street	00000		
	Orlando FL.	32896	As of the date you file, the claim is: Check all that apply.	
	City State	ZIP Code		
	Who incurred the debt? Check one.		Contingent	
	Debtor 1 only		Unliquidated	
	Debtor 2 only		☐ Disputed	:
	Debtor 1 and Debtor 2 only			,
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		☐ Student loans	
	Check if this claim is for a community de	ebt	Obligations arising out of a separation agreement or divorce	;
	· ·		that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	Mo No □		Other. Specify Charge Account	
	Yes			i

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Debtor 1

Sharnell First Name

May Middle Name

Lawrence Last Name Document

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Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

SYNCB/WALMART Nonpriority Creditor's Name			Last 4 digits of account number 3 2 2 0	_{\$_2,207.0}
PO Box 965024			When was the debt incurred? 11/01/2014	
Number Street Orlando	FL.	32896	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Che	ck one		Unliquidated	
Debtor 1 only	GK Drie,		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a	nd another		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for	a community debt		you did not report as priority claims	
Is the claim subject to offset	-		Debts to pension or profit-sharing plans, and other similar debts	
No	ır		☑ Other. Specify Charge Account	
Yes				
A magana pangangan a hanganan ana ana ana ana ana ang ang ang	MAN KANGAR (CHIA BIN CANABANAN ASMANAN ASMAN ASMAN ASMAN ASMAN	t toloris la la come es se sensant se present la minera accessor	annere annot i re-responsable monerare per expressivo suche e reconstruction e reconstruction de constante e reconstruction de	
US Bank			Last 4 digits of account number 0 7 5 1	\$ <u> </u>
Nonpriority Creditor's Name			When was the debt incurred? 02/01/2017	
4325 17th Avenue S				
Fargo	ND	58125	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
1476 - 1			Unliquidated	
Who incurred the debt? Cher	ck one.		☐ Disputed	
Debtor 1 only Debtor 2 only			_	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors a	nd another		Student loans	
			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Check if this claim is for	=		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	?		Other. Specify Credit Card	
₩ No				
☐ Yes				
η το Cartantaine white house (Carta) εθραθή καθμονική δρασβουά (Carthaga Antibaga Antibaga Antibaga Antibaga A - Cartantaine	transful territiska etti findi viina valapadinada et yerda valafu valafu valafu	kan han kiramet ya hamanagan ha hati, kita ya matikirishi a sala na da na manana ya matika	PER AND THE CONTROL OF T	s 7,220.6
WFFNATBANK			Last 4 digits of account number 7 4 4 2	Ψ
Nonpriority Creditor's Name			When was the debt incurred? 02/01/2015	
PO Box 94498 Number Street			-	
Las Vegas	NV	89193	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Chec	de ann		Unliquidated	
	ik one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Tors of MONDRODITY	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors an	nd another		Student loans	
Check if this claim is for a			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	•		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset	?		✓ Other Specify Charge Account	
☑ No				

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Debtor 1

Sharnell

May

Lawrence Document

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First Name Middle Name Case number (# known)_



Your NONPRIORITY Unsecured Claims - Continuation Page

Professional Clinical Laboratories LLC Nonpriority Creditor's Name			Last 4 digits of account number 0 9 7 5	s 18.0
Nonpriority Creditor's Name 26051 Network Place			When was the debt incurred? 09/27/2017	9
Number Street				
Chicago	IL	60673	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only		ZIP Code	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans	
☐ At least one of the debtors and ar ☐ Check if this claim is for a colls the claim subject to offset? ☑ No ☐ Yes			 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical 	
Pain Control Associates Nonpriority Creditor's Name		harmon et erno men reiste til ett vijet	Last 4 digits of account number 8 2 4 8 When was the debt incurred? 09/15/2017	\$ <u>1,071.0</u>
PO Box 787			When was the debt incurred? U9/15/2017	
Number Street Schereville	IN	46375	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim is for a corls the claim subject to offset? Mo Yes	other		 Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Medical 	
Athletic & Therapeutic Inst			Last 4 digits of account number 8 0 9 4	\$ 5,737.0
Nonpriority Creditor's Name PO Box 371863			When was the debt incurred? 09/21/2017	
Number Street Pittsburgh	PA	15250	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one	> .		Unliquidated Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
\square At least one of the debtors and an	other		Student loansObligations arising out of a separation agreement or divorce that	
Check if this claim is for a con	nmunity debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Medical	
☑ No ☐ Yes				

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Debtor 1

Sharnell First Name

May

Lawrence Last Name

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Case number (if known)

Part 48 Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only, 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. Total. Add lines 6a through 6d.	6e.	\$	0.00
5 d .				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	0.00
		Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		0.00
Total claims	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		\$	
Total claims	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	\$	0.00

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2010/2011/00/00/00/00/00/00/00/00/00/00							}						
Debtor	Sharnell First Name	May		rence	Last Name								
Debtor 2 (Spouse If filing	First Name		2 4:00 44	- 1									
				e Name	Last Name	- Charge							
	Bankruptcy Co	ourt for the: I	Normen	II DISTRICT OF	IIIITOIS	X							
Case number (If known)											[Chec	k if this is
							I					amei	nded filing
. cc	F 40	200											
πιciai ι	Form 10	16G											
ched	ule G:	Exec	uto	ry Co	ntracts	and L	Jnexi	oired	Leas	ses			12/15
***************************************					ried people are			-				do-	
. List sepa	rately each p	person or	comna					P1	whot oo	ch cont	raat ar l		
unexpire	, rent, vehicle d leases.	e lease, c	eil phoi	ne). See the	om you have to instructions for ntract or lease	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ease is i	contracts a
Person c	, rent, vehicle d leases.	e lease, c	eil phoi	ne). See the	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c	, rent, vehicle d leases.	e lease, c	eil phoi	ne). See the	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c	, rent, vehicle d leases. or company v	e lease, c	eil phoi	ne). See the	instructions for	he contract	the instruc	tion booklet	for more	e examp	les of ex	ease is i	for (for contracts a
Person c	, rent, vehicle d leases.	e lease, c	eil phoi	ne). See the	instructions for	he contract	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c	, rent, vehicle d leases. or company v	e lease, co	eil phoi	ne). See the	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	for (for contracts a
Person c	, rent, vehicle d leases. or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c	, rent, vehicle d leases. or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c Name Number City Name	or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory	contracts a
Person c Name Number City	, rent, vehicle d leases. or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ease is 1	contracts a
Person c Name Number City Name	or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ected is 1 (ecutory)	for (for contracts a
Person c Name Number City Number City	or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory (Contracts a
Person c Name Number City Number City	or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ease is 1	contracts a
Name Number City Name Number	street	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecase is in equation of the second of the se	Contracts a
Person c Name Number City Name Number City	or company v	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	Solutions of the solution of t	Contracts a
Name Number City Name Number Number	street	e lease, co	ell phoi	ave the cor	instructions for	he contract this form in	the instruc	tion booklet	for more	e examp	les of ex	ecutory (for (for contracts a

City

Number

City

Name

Number

2.5

Street

Street

ZIP Code

ZIP Code

State

State

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Debtor 1	Sharnell	May	Lawrence
	First Name	Middle Name	Last Name
Debtor 2			
Spouse, if filir	ng) First Name	Middle Name	Last Name
Jnited State	s Bankruptcy Court for t	the: Northern District of I	Ilinois

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

No No	nave any codebtors? (If you are filing a joint case	, do not list either spouse as a d	codebtor.)
☐ Yes			
Within th Arizona, (ne last 8 years, have you lived in a community California, Idaho, Louisiana, Nevada, New Mexico	property state or territory? (Co., Puerto Rico, Texas, Washingi	ommunity property states and territories include on, and Wisconsin,)
🗹 No. G	Go to line 3.		,
	Did your spouse, former spouse, or legal equivale	nt live with you at the time?	
□ N			
∟ Y∈	es. In which community state or territory did you li	ve? Fill	in the name and current address of that person.
Ni	lame of your spouse, former spouse, or legal equivalent		
Ni	lumber Street		
Ci	ity State	ZIP Code	
	n 1, list all of your codebtors. Do not include y		
Schedule Schedule	e D (Official Form 106D), Schedule E/F (Official e E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Ma Form 106E/F), or Schedule G	
schedule Schedule	e D (Official Form 106D), Schedule E/F (Official	is a guarantor or cosigner. Ma Form 106E/F), or Schedule G	ke sure you have listed the creditor on (Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the d Check all schedules that apply:
Schedule Schedule Column	e D (Official Form 106D), Schedule E/F (Official e E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Ma Form 106E/F), or Schedule G	(Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the d Check all schedules that apply:
schedule Schedule	e D (Official Form 106D), Schedule E/F (Official e E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Ma Form 106E/F), or <i>Schedule G</i>	(Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line
chedule chedule Column	e D (Official Form 106D), Schedule E/F (Official e E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Ma Form 106E/F), or Schedule G	(Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the d Check all schedules that apply:
chedule Column	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2.	is a guarantor or cosigner. Ma Form 106E/F), or Schedule G	(Official Form 106G). Use Schedule D, Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line Schedule E/F, line
Column Name Number City	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street	Form 106E/F), or Schedule G	Column 2: The creditor to whom you owe the dicheck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Schedule Schedule Column Name	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street	Form 106E/F), or Schedule G	Column 2: The creditor to whom you owe the dicheck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Name Number City	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street	Form 106E/F), or Schedule G	Column 2: The creditor to whom you owe the dicheck all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Name Name Name	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street State	Form 106E/F), or Schedule G	Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule D, line
Name Number Number Number	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street State	Form 106E/F), or Schedule G ZiP Code	Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule D, line Schedule D, line
Name Number City Name Number City Name	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street State	Form 106E/F), or Schedule G ZiP Code	Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule E/F, line Schedule D, line
Name Number City Name City	e D (Official Form 106D), Schedule E/F (Official a E/F, or Schedule G to fill out Column 2. 1: Your codebtor Street State	Form 106E/F), or Schedule G ZiP Code	Column 2: The creditor to whom you owe the d Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line

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E	ill in this ir	formation to identify	your case:					
D	ebtor 1	Shernell First Name	May	Lawrence	THE APPLIES AND ADDRESS AND AD			
	ebtor 2		Middle Name	Last Name				
`	Spouse, if filing) Inited States		Middle Name Northern District of Illinois	Last Name				٠,
	ase number	bankropicy countrior tre.	Notate III District of Millors			Chook if th	ala la	
1 .	f known)					Check if the Check	ended filing	
						🔲 A supp	plement showing pose as of the following of	
01	fficial Fo	orm 106I					D / YYYY	acto.
S	ched	lule I: You	ır Income					12/15
suj If y sep	oplying cor ou are sep parate shee	rect information. If your arated and your spot	ossible. If two married peopurare married and not filing with you, or top of any additional page	ing jointly, and yo do not include in	our spouse is formation abo	living with your spo	ou, include informationse. If more space is r	n about your spouse.
1.	Fill in your	employment		Debtor 1	A CONTRACTOR		Dobtor 2 or non £	
:		m. more than one job,		**************************************	gyvagyvająkoś obraży śroszlościm Moskowski kiel Principi		Debtor 2 or non-fi	ing spouse
:	attach a se	parate page with about additional	Employment status	E mployed			☐ Employed	
	employers.			☐ Not employ	ed		■ Not employed	
1 1	self-employ	t-time, seasonal, or /ed work.		Order Taker				!
		n may include student aker, if it applies.	Occupation	Older Taker				
			Employer's name	Inter Contine	ntal Hotel			
			Employer's address	505 North Min Number Street	chigan Ave	nue	Number Street	:

				Chiago	IL State ZIP	60611	City	State ZIP Code
:			How long employed ther	•	Otato Zir	0000	23 Yrs	State Zir Code
							23 113	:
12	art 2:	Give Details About	Monthly Income					
	spouse unli	ess you are separated.						-
	If you or yo below. If yo	ur non-filing spouse ha u need more space, at	ve more than one employe tach a separate sheet to th	r, combine the info is form.	rmation for all	employers fo	r that person on the line	s
					For	Debtor 1	For Debtor 2 or non-filing spouse	;
2.			ery, and commissions (be calculate what the monthly		2. <u>\$2</u>	2,900.00	\$	•
3.	Estimate :	and list monthly over	time pay.		3. +\$	0.00	+ \$:
4.	Calculate	gross income. Add lir	ne 2 + line 3.		4. \$2	2,900.00	\$	

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Debtor 1	Shernell First Name	Middle Name	May Last Nam	Lawrence		C	Case number (# kno	wn)		
		,				Fo	or Debtor 1	For Debtor 2 or non-filing spouse		
Сору	line 4 here		***************************************		→ 4.	\$_	2,900.00	\$		
5. List a	li payroli dedu	ıctions:								
5a.	Tax, Medicare	, and Social	Security deduc	tions	5a.	\$	68,400.00	\$		
5b. I	Mandatory co	ntributions f	or retirement pl	ans	5b.		0.00	\$		
5c. \	Voluntary con	tributions fo	r retirement pla	ns	5c.	\$_	148.00	\$		
5d. l	Required repa	yments of re	etirement fund l	oans	5d.	\$	0.00	\$	-	
5e. i	nsurance				5e.	\$	0.00	\$	•••	
5f. (Domestic sup	port obligati	ons		5f.	\$	156.00	\$		
5g. l	Jnion dues				5g.	\$	0.00	\$	_	
5h. (Other deduction	ons. Specify:	Sro Loans		5h.	+ \$	214.00	+ \$		
6. Add	the payroll de	ductions. A	dd fines 5a + 5b	+ 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	1,202.00	\$	-	
7. Calc	ulate total mo	nthly take-h	ome pay. Subtra	ct line 6 from line 4.	7.	\$	1,698.00	\$	-	
8. List a	II other incom	e regularly	received:							
F	profession, or	farm		operating a business,						
r	Attach a statem eceipts, ordina nonthly net inc	ry and neces	property and bus sary business ex	iness showing gross penses, and the total	8a.	\$	0.00	\$		
	nterest and di				8b.	\$	0.00	\$		
8c. F	amily suppor	t payments t	hat you, a non-	filing spouse, or a depende		Ψ		Y.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•	
ii s	nclude alimony ettlement, and	, spousal sur property sett	port, child suppo lement.	ort, maintenance, divorce	8c.	\$	0.00	\$	-	
8d. L	Inemploymen	t compensat	ion		8d.	\$	0.00	\$		
8e. S	locial Security	<i>!</i>			8e.	\$	0.00	\$		
lr ti N	nclude cash as nat you receive lutrition Assista	sistance and , such as foo	nce that you reg the value (if known d stamps (benefit a) or housing sub	vn) of any non-cash assistar ts under the Supplemental	ice					
S	pecify:	· · · · · · · · · · · · · · · · · · ·	W-14		8f.	\$	0.00	\$		
8g. P	ension or reti	rement inco	me		8g.	\$	0.00	\$		
8h. C	ther monthly	income. Spe	cify:		8h.	+\$	0.00	+ \$		
9. Add a	all other incon	ne. Add lines	8a + 8b + 8c + 8	d + 8e + 8f +8g + 8h.	9.	\$_	0.00	\$		
	ate monthly in e entries in line			or non-filing spouse.	10.	\$	1,698.00	\$0.00	_ = \$	1,698.00
Includ				enses that you list in Scheo embers of your household, y			ents, your room	mates, and other	<u></u>	VIII
Do not Specif				es 2-10 or amounts that are			to pay expens		. + \$	0.00
12. Add ti				the amount in line 11. The			combined mont			
Write t	hat amount on	the Summar	y of Your Assets	and Liabilities and Certain S	tatisti	cal Info	ormation, if it ap	plies 12	· · · · · · · · · · · · · · · · · · ·	1,698.00 mbined
13. Do yo		ncrease or d	ecrease within	the year after you file this f	orm?				mo	nthly income
	es. Explain:									

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Debtor 2	ast Name		t showing post of the following	petition chapter 13 g date:
Official Form 106J				
Schedule J: Your Expenses				12/15
Be as complete and accurate as possible. If two married peop information. If more space is needed, attach another sheet to (if known). Answer every question.	le are filing togethe this form. On the t	er, both are equally respons op of any additional pages,	sible for supply write your nam	ing correct e and case number
Part 1: Describe Your Household				
1. Is this a joint case?				
✓ No. Go to line 2.☐ Yes. Does Debtor 2 live in a separate household?				
✓ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expense	ses for Separate Ho	ousehold of Debtor 2.		
2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do you have dependents? Yes. Fill out this informate each dependent	ation for Debtor 1	nt's relationship to or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.				No No Yes
				Yes
	NEWVolumburs		A-1011 & Married Marri	☐ No ☐ Yes
	**************************************		And the second s	☐ No ☐ Yes
		***************************************		☐ No ☐ Yes
3. Do your expenses include expenses of people other than yourself and your dependents?				
Part 2: Estimate Your Ongoing Monthly Expenses				
Estimate your expenses as of your bankruptcy filing date unler expenses as of a date after the bankruptcy is filed. If this is a sapplicable date.	upplemental Sche	dule J, check the box at the	a Chapter 13 c top of the form	ase to report and fill in the
Include expenses paid for with non-cash government assistant such assistance and have included it on Schedule I: Your Income.			Your exper	ises
The rental or home ownership expenses for your residence any rent for the ground or lot.		•	\$	1,284.00
If not included in line 4:				
4a. Real estate taxes		4a.	\$	0.00
4b. Property, homeowner's, or renter's insurance		4b.	\$	0.00
4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues		4c.	\$	0.00
4d. Homeowner's association or condominium dues		4d.	\$	0.00

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Debtor 1 Sharnell May Lawrence Case number (if known)

			Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	110.00
	6b. Water, sewer, garbage collection	6b.	\$	45.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	55.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	100.00
8.	Childcare and children's education costs	8.	\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	0.00
10.	Personal care products and services	10.	\$	25.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	60.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
17,	installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1	Sharnell First Name	May Middle Name	Lawrence Last Name	Case number (if known))	· · · · · · · · · · · · · · · · · · ·	
21. Oti	her. Specify:			_	21.	+\$	0.00
22. Ca l	culate your mon	thly expenses.					temperapers and the state of the
228	a. Add lines 4 thro	ugh 21.		2	22a.	\$	1,679.00
22t	o. Copy line 22 (m	onthly expenses	for Debtor 2), if any, from Official Form	106J-2 2	.2b.	\$	0.00
220	. Add line 22a and	d 22b. The result	is your monthly expenses.	2	2c.	\$	1,679.00
23 Calc	ulate your montl	alv not income					
23. Calc 23a.			nthly income) from Schedule I.	2	23a.	\$	1,698.00
23b.	Copy your mont	hly expenses fro	m line 22c above.	2	23b.	-\$	1,679.00
23c.		onthly expenses ur monthly net ind	from your monthly income. come.	2	23c.	\$	19.00
24. Do y	ou expect an inc	rease or decrea	se in your expenses within the year	after you file this form?			
For e	example, do you e gage payment to i	xpect to finish pa	lying for your car loan within the year or pase because of a modification to the te	do you expect your rms of your mortgage?			
A N		e transportation of the commence of the commen	ang ann air, ainn ag a ann an ag ag ag ag an an an ag ag ag an an ag ag ag an an ag				
☐ Y	es. Explain he						
	·						
	i.						

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Fill in th	his inform	ation to ic	dentify your ca	se:					
Debtor 1	Sha First N	rnell	May		ence				
Debtor 2			Middle		Last Name				
	f filing) First N tates Bankrt		Middle for the: Northern		Last Name				
Case nur	mber				,,,,,,,				
(lf known)									Check if this is an amended filing
									ŭ
Officia	al Forr	n 107							
			_	Affairs	s for Indi	viduals I	Filina for	Bankrupt	CV 04/16
Be as cor information number (mplete and on. If moi if known).	d accurate re space i: Answer e	e as possible. s needed, attac every question	If two marrie ch a separate	d people are filir s sheet to this fo	ng together, bo rm. On the top	oth are equally re of any additiona	sponsible for supp Il pages, write you	lving correct
Part 1:	Give	Jetails A	Dout Your M	arital Statu	s and Where	ou Lived Be	fore		
1. What	t is your c	urrent ma	rital status?						
	/larried								
	lot married	I							
y N	lo	of the pla	ces you lived in	the last 3 year	ars. Do not include Dates Debtor 1 lived there	e where you liv	e now.		Dates Debtor 2 lived there
						Same as E	Debtor 1		Same as Debtor 1
	Number	Street			From	11		***************************************	From
	reamoer	Ollect			То	Number :	Street		To
	-10-10-10-10-10-10-10-10-10-10-10-10-10-	***************************************	A			***************************************			<u>.</u>
	City		State Zi	P Code		City		State ZIP Code	-
						Same as D	ebtor 1	••	Same as Debtor 1
					From				_ From
	Number	Street			То	Number 5	Street		To
									-
	City		State ZI	P Code		City		State ZIP Code	_
	-					•			
States N	s <i>and ternt</i> o es. Make s	ories inclui	de Arizona, Cal	itornia, Idaho,	use or legal equi Louisiana, Neva btors (Official For	da, New Mexico	nmunity propert o, Puerto Rico, Te	r state or territory? xas, Washington, ar	(Community property d Wisconsin.)

Part 2: Explain the Sources of Your Income

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tor 1	Snarnell First Name	May	lawrence	Case nu	ımber (if known)	
	r not regine	Middle Name Las	1 Name			
If you	n the total amoun u are filing a joint	it of income you receive case and you have inc	nt or from operating a bu ed from all jobs and all busi come that you receive toget	nesses, including part-ti	r or the two previous caled me activities. er Debtor 1.	ndar years?
	es. Filt III tile del	tails.				
			Debtor 1		Debtør 2	ng dia 6946 panggang Kanggang kanggang
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	Wages, commissions, bonuses, tips✓ Operating a business	\$30,453.00	Wages, commissions, bonuses, tips	\$
			Operating a business		Operating a business	
	For last calenda	•	Wages, commissions, bonuses, tips	\$ 34,127.00	Wages, commissions, bonuses, tips	\$
((January 1 to Dec	cember 31, <u>2015</u> YYYY	Operating a business		Operating a business	·
F	For the calendar	year before that:	Wages, commissions, bonuses, tips	20.007.00	Wages, commissions, bonuses, tips	
	January 1 to Dec	cember 31,2016	Operating a business	\$ 33,897.00	Operating a business	\$
()id y e ncluo inem jamb	ou receive any on the income regard aployment, and of alling and lottery w	other income during the least of whether that income the public benefit payment innings. If you are filing	his year or the two previo come is taxable. Examples nents; pensions; rental inco g a joint case and you have	of other income are alim eme; interest; dividends; income that you receive	nony; child support; Social S money collected from lawsu ad together, list it only once	its: rovalties: and
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id yencluo nem amb ist ea	ou receive any of the income regard iployment, and of ling and lottery we ach source and to	other income during to fless of whether that inc ther public benefit paym vinnings. If you are filing the gross income from a	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do	of other income are alim eme; interest; dividends; income that you receive	nony; child support; Social S money collected from lawsued together, list it only once you listed in line 4.	its: rovalties: and
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(id ye ncluo nem amb ist ea Ye	ou receive any of the income regard iployment, and of ling and lottery we ach source and to es. Fill in the deta	Other income during to dless of whether that inc ther public benefit paym vinnings. If you are filing the gross income from e	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debtor 1 Sources of Income Describe below.	of other income are alime; interest; dividends; income that you receive a not include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsued together, list it only once you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross income from each source (before deductions)
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(Did ye notion and pamb ist each of the pamb is each of t	ou receive any of the income regard aployment, and of soling and lottery wach source and to es. Fill in the details. From January 1 the date you file.	other income during to the fless of whether that incides of whether that incide ther public benefit paymy innings. If you are filing the gross income from earlis. of current year until d for bankruptcy: r year: cember 31,2015	his year or the two previous come is taxable. Examples nents; pensions; rental incog a joint case and you have each source separately. Do Debter 1 Sources of Income Describe below.	of other income are alime; interest; dividends; income that you receive not include income that Gross income from each source (before deductions and exclusions)	nony; child support; Social S money collected from lawsued together, list it only once you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions) \$
Did your Include unem gamb No Yes	ou receive any of the income regard of ployment, and of ployment, and of the source and the sour	other income during to the fless of whether that income the public benefit paymy innings. If you are filing the gross income from earlis. of current year until d for bankruptcy: r year: cember 31,2015	his year or the two previous come is taxable. Examples ments; pensions; rental income a joint case and you have each source separately. Do Debter 1 Sources of Income Describe below.	of other income are alime; interest; dividends; income that you receive to not include income that Gross income from each source (before deductions and exclusions)	nony, child support, Social S money collected from lawsued together, list it only once you listed in line 4. Debtor 2 Sources of Income Describe below.	Gross Income from each source (before deductions) \$

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lawrence

Debtor 1 Case number (if known) First Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? Mo. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of Total amount paid Amount you still owe Was this payment for... payment ☐ Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or vendors Other State ZIP Code ☐ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other___ State ZIP Code ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other___ City State ZIP Code

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Within 1 year before you filed for bankruptcy, did you make a pay Insiders include your relatives; any general partners; relatives of any goorproations of which you are an officer, director, person in control, or agent, including one for a business you operate as a sole proprietor. It such as child support and alimony. No Yes. List all payments to an insider. Dates of payment Insider's Name Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any paran insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment	general partners; powner of 20% or 1 U.S.C. § 101. In Total amount paid	partnerships of whic more of their voting nclude payments fo	ch you are a general partner; a securities; and any managing
Insider's Name Number Street City State ZIP Code Insider's Name Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any paran insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of	paid \$	owe \$	Reason for this payment
Number Street City State ZIP Code Insider's Name Number Street City State ZIP Code Within 1 year before you filed for bankruptcy, did you make any pa an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of	\$s	\$\$	
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Vithin 1 year before you filed for bankruptcy, did you make any pan insider? nclude payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of	ryments or trans		
Nithin 1 year before you filed for bankruptcy, did you make any paan insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of	yments or trans		
☑ No ☐ Yes. List all payments that benefited an insider. Dates of		fer any property oi	n account of a debt that benefited
Dates of			
	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name	\$	\$	
Number Street			
City State ZIP Code		1 0 10 10 10 10 10 10 10 10 10 10 10 10	
Insider's Name	\$	\$	11/4 (**Atom) nome (remembragem), themselves (remembragem) (remembragem)
Number Street		The state of the s	
		Political and the state of the	

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	arnell	May				Odde Humber (# xiib	wn)	
rirst	suvame M	iddle Name	Last Name					
t 4: Ide	entify Lega	l Actions, R	epossession	s, and Forecl	osures			
/ithin 1 ye	ear before yo	ou filed for ba	nkruptcy, were	you a party in	any lawsuit,	court action, or adn	ninistrative proc	eeding?
ist all such	h matters, inc	luding persona	al injury cases, s	small claims act	ons, divorces	, collection suits, pate	ernity actions, sup	pport or custody modificat
	ct disputes.							
No								
l Yes. Fill	II in the details	s.						
			Nature	of the case		Court or agency	1 1/2 1/2	Status of the case
					1			
Case tit	tle				í	Court Name		Pending
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Caro n	umbor							Concluded
Jase III	GITIDEI				7	ity St	ate ZIP Code	-,,
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Case nu	umber							
neck all tha No. Go	ear before you at apply and to to line 11.	fill in the detail	nkruptcy, was a s below.	any of your pro			ate ZIP Code	ned, seized, or levied?
eck all tha No. Go	at apply and to line 11.	fill in the detail	nkruptcy, was a	any of your pro	perty reposs			
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or 1 Sharnell First Name	May Middle Name Las	lawrence	Case number (if know	wa)	
Within 90 days befor accounts or refuse to	e you filed for bankru o make a payment be	iptcy, did any creditor, cause you owed a debt	including a bank or financial insti ?	itution, set off any a	mounts from your
Yes. Fill in the deta	nile				
- res. i ili ai tile dete	1115.	the second	enterent er en	TELEVISION N	and the second second
		Describe the action th	e creditor took	Date action was taken	Amount
Creditor's Name					
Number Street		-			\$
City	State ZIP Code		nt number: XXXX		
Within 1 year before y creditors, a court-app No	you filed for bankrup pointed receiver, a cu	tcy, was any of your pro stodian, or another offi	operty in the possession of an assicial?	signee for the benef	ît of
Yes					
1159 List Certain	Gifts and Contribu	ıtions			
Nithin 2 years hefore	way filed for hank-	store did non mino anno	ifts with a total value of more than		
No No	you med for banking	ncy, aid you give any g	itts with a total value of more thai	n \$600 per person?	
Yes. Fill in the deta	ils for each gift				
Gifts with a total va	tiue of more than \$600	Describe the gifts		Dates you gave the gifts	Value
Person to Whom You Ga	we the Cit				\$
T GISOTTO WHOM TOO GO	Ae frie Out				
***************************************					\$
		_			
Number Street					
City	State ZIP Code	- !		1	
Person's relationship	lo you	-			
Gifts with a total value per person		Describe the gifts		Dates you gave the gifts	Value
Person to Whom You Ga	ve the Gift	-			\$
		-			\$
Number Street		**************************************			
City	State ZIP Code	- - !		To the state of th	
Person's relationship t	o you			: !	

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btor 1	Sharnell First Name	May Middle Name	lawrence	. Case number (if known)		
	i nai ridino	widdio Manie	Last Name			
18774	hin 2 yaara bafa		must g seek			
		re you tiled for b	ankruptcy, did you give any g	ifts or contributions with a total value	of more than \$6	00 to any charity?
			. 10			
		etails for each gift				
	Gifts or contribu	itions to charities	Describe what you cont	ributed	Date you	Value
	that total more ti	han \$600			contributed	Adine
				A North Colored Charles In the Colored		
						m.
	Charity's Name					p
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				We see that the second		Φ
,			***************************************			
	Number Street					
1	City State	ZIP Code		THE COLUMN TWO IS NOT		
			* Bell offense and the second of the second			
i Salada	C-SCC I					
3 G	I into Combo	in Losses				
M	List Certa	iin Losses				
	Yes. Fill in the de Describe the prop how the loss occ	perty you lost and	Describe any insurance	coverage for the loss	Date of your	Value of property
			Include the amount that in claims on line 33 of Scher	ISUITANCE NAS NAIN LIST NENDING INSUITANCE	loss	lost
						¢
						Ψ
	1 - · · · · · · · · · · · · · · · ·		annumprisses, f			
7	List Certair	n Payments or	Transfers	e e e e e e e e e e e e e e e e e e e		* *
OH I	consulted about	you nied for ban t seeking hankry	kruptcy, did you or anyone el ptcy or preparing a bankruptc	se acting on your behalf pay or transf	ier any property t	o anyone
ıclu	de any attorneys	, bankruptcy petitic	on preparing a bankrupto	ey petition? Inglagencies for services required in your	r hankruntou	
3 N			. , , , , , , , , , , , , , , , , , , ,	-3 -34 - oco to controdo required in your	bankiupicy.	
	es. Fill in the det	tails.				
•			V 1 V 1	a Negre A	entro e e e	grani a a s
			Description and value of		Date payment or	Amount of payment
	Person Who Was Paid	d			transfer was made	
	Number Street					\$
						\$
	City	Ct-1- Win -		-		Ψ
,	City	State ZIP Cod	pe .			
;	Email or website addre	bee	···			
	o. nobale actie	and the second		aren e		
i	Person Who Made the	Payment, if Not You				

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1	Sharnell First Name	May Middle Name	lawrence Case nun	nber (if known)	
	FIISLINATRIC	widde Name	Lasi Name		
-	and an All State of the All State of the All State of the All State of the All States of the All State	en i martina de martina e e e e e e e e e e e e e e e e e e e	Andrewson to the state of the s	«Вист бізгост» такор станару станару візгоступа да подавання до проду візгоступа да подавання да подавання да п	enteres despresses propries consequences as comments of
			Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Person Who Was P	bis	—		
					\$
	Number Street				
					\$
	Olb	A	-		
	City	State ZIP Code		**************************************	
	Email or website add	tress			
	Person Who Made th	he Payment, if Not You	<u> </u>		
FOI	mised to help yo	ou deal with your cre	uptcy, did you or anyone else acting on your behalt editors or to make payments to your creditors? at you listed on line 16.	,,,,,	•
1 :	No				
١ ١	Yes. Fill in the de	etails.	New York Control of the State o	grandents and day on a	
			Description and value of any property transferred	Date payment or transfer was	Amount of paym
	Person Who Was P	aid		made	
	Number Street				\$
					_
	City	State ZIP Code	vandate		\$
ith	•		ruptcy, did you sell, trade, or otherwise transfer an	v proporty to anyone other th	
an	sferred in the o	rdinary course of yo	ur business or financial affairs?		
olu o n	ide both outright not include gifts a	transfers and transfe and transfers that you	rs made as security (such as the granting of a security have already listed on this statement.	interest or mortgage on your pro	perty).
1	No		· · · · · · · · · · · · · · · · · · ·		
١ ١	Yes. Fill in the de	etails.	And have been a sectionally and the second of the second	alita e i majora i i a majora i	e en l'haith i f
			Description and value of property Describe :		Date transferwas made
	Person Who Receive	d Transfer	_	The state of the s	
	Allowa Chara				
	Number Street				
			-		
	City	State ZIP Code	 		
	City Person's relations	hip to you			
	Person's relations	hip to you			
	-	hip to you			
	Person's relations	hip to you			
	Person's relations	hip to you			
	Person's relations	hip to you			

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	Sharnell	May	lawrence	Case number (if known)	
	First Name	Middle Name	Last Name		
Withir	n 10 years befo	re you filed for I	pankruptcy, did you transfer any prope	rty to a self-settled trust or similar device of which yo	11
are a	beneficiary? (T	hese are often ca	alled asset-protection devices.)	The second secon	ч
Ø No	_				
□ Y€	es. Fill in the det	ails.			
			Description and value of the prop	그는 그는 그를 보고 있는 사람들이 되는 것이 되는 것은 것을 받아 되었다는 것들만 것	
					e transfer : made
*1-					
149	ame of trust				
			· · · · · · · · · · · · · · · · · · ·		
		them of the contract of the co		Антинантуру Бильтурундуу Артин шишин түү түрүү күрүнү бүрүү бүрүү түрүү жүрөн түрүү үчүн түрүү түрүү түрүү түрү	ayer resource a security of a
			ounts, instruments, Safe Deposit		
Nithin	1 year before	you filed for bar	nkruptcy, were any financial accounts	or instruments held in your name, or for your benefit,	
closed	d, sold, moved,	or transferred?	•		
nclud orokei	le checking, sa rade houses in	vings, money m	arket, or other financial accounts; cert coperatives, associations, and other fi	ficates of deposit; shares in banks, credit unions,	
Z No	1 ago 1102303, p	chaion lulius, ci	soperatives, associations, and other II	nancial institutions.	
	s. Fill in the de	tails.			
			Last 4 digits of account number	요그 그 그리고 그 전에 그를 맞고 그 사람이 물론이 되는데 하게 하다.	
			cast 4 digits of account number	instrument closed, sold, moved, closing	lance befo or transfe
				or transferred	**
Na	ame of Financial Ins	titution	XXXX	Checking s	
Al.	umber Street			□ Savings	
***	amber offeet			☐ Money market	
		<u> </u>		☐ Brokerage	
Cř	ity	State ZIP Co	ode	Other	
٠.			A Section 1997 and the section of th	20100	
			xxxx	☐ Checking	
	ame of Financial Ins	fitution	xxxx		
Na	ame of Financial Ins	fitution	xxxx	Savings	
Na		titution	XXXX	☐ Savings ☐ Money market	
Na		titution	XXXX	Savings	

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Name of S Number City Part 9: Ide 23. Do you hold or hold in tru No Yes. Fill i Owner's N Number City Part 10: Gh For the purpose Environment hazardous or including sta Site means at utilize it or us Hazardous m substance, has Report all notice	in the details. Storage Facility Street Sta Jentify Proper or control any sust for someone in the details.	ty You Hold o	Name Number Street City State ZIP Code	ad access to it? meone Else ? Include any	•	ou borrowed from, an		Do you still have it? No Yes
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Number City Part 9: Ide 23. Do you hold or hold in tru V No Ves. Fill in Owner's N Number City Street Sta Sta Ientify Proper or control any ust for someone in the details.	ty You Hold o	Number Street CityState ZIP Code or Control for Sol	? Include any	property y		e storing for,	☐ Yes	
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Owner's N Owner's N Number City City Cor the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	f or control any ust for someon in the details.	property that s	omeone else owns' Where is the proper	? Include any	property y		e storing for,	
Owner's No Owner's No Owner's No Owner's No Number City Or the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	in the details.		Where is the proper	11			e storing for,	
Owner's No Owner's No Owner's No Owner's No Number City Or the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	in the details.		Where is the proper	11			e storing tor,	
Owner's N Number City	Name			nty?	18879	Describe the property		
Owner's N Number City City For the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	Name			rty?	18479	Describe the property		
City City Control City Control Con				rty?	\$\$4.79	Describe the property		
City City Corte purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha								
City Cor the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha			Number Street					_
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or the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	Street		****			<u>.</u>		
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or the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha								
For the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	Sta	te ZIP Code	City	State Z	IP Code			
For the purpose Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha								. !
Environment hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	ve Details Ab	out Environm	nental informatic	n				
Environments hazardous or including sta Site means a utilize it or us Hazardous m substance, ha	e of Part 10, the	following defir	itions anniv					
hazardous or including sta Site means a utilize it or us Hazardous m substance, ha								
Site means and utilize it or us Hazardous manual substance, has seport all notice	or toxic substan	ces, wastes, or	material into the ai	ir, land, soil, s	surface wat	er, groundwater, or o	tion, releases of ther medium,	
utilize it or us Hazardous m substance, ha teport all notice								
Hazardous m substance, hate deport all notice	ised to own, op	anty, or proper. erate, or utilize	it, including dispos	any environn sal sites	nentai iaw,	wnetner you now ow	n, operate, or	
substance, h								
leport all notice	<i>nateriai</i> means : nazardous mate	inytning an env rial, polititant (vironmental law det contaminant, or sim	ines as a haz	ardous was	ste, hazardous substa	ance, toxic	
	es, releases, an	d proceedings	that you know abou	ut, regardiess	of when th	ney occurred.		
avon vae aeH à	ernmental unit ı	notified you the	t vou mou be liable	nu mata-ti-th	. !!=\$.4			
Trias any gove	sitmiciates time (ouned you tha	it you may be hable	or potentially	i ilabie undi	er or in violation of ar	environmental	law?
☑ No								
🔲 Yes, Fill in	in the details.							
			Governmental unit		Environm		18.19	
			Soverimental will		ENVIRONM	ental law, if you know it		Date of notice
Name of site			Governmental unit					
	3							
Number St	3				4			ā
			Number Street					
·····			Number Street		-			
***************************************			Number Street		-			
City			Number Street City Sta	ste ZIP Code	-			

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ebtor 1	Sharnell First Name	May Middle Name	lawrence Last Name	Case numb	er (if known)	
			Control			
25. Hav	e you notified an	າy governmental ເ	ınit of any release of hazardous m	aterial?		
Ø						
	Yes. Fill in the de	etails.	The state of the s	i decesi	and the second second second	
			Governmental unit	Environmental la	aw, if you know it	Date of notice
	Name of site					
			Governmental unit	: :		
	Number Street		Number Street			
			City State ZIP Coc	le .		
	City	State ZIP Co-	de			
e Have	• ··•·· been •				e e e	
o. Hav		ty in any judicial d	or administrative proceeding unde	r any environmental !	law? Include settlements and	orders.
	No Yes. Fill in the de	etails.				
			Court or agency	Nature of th	e case	Status of the
,	Case title			i		case
			Court Name			Pending
-			Number Street			On appeal
						Concluded
•	Case number		City State Zi	P Code		
art 1			Business or Connections to		•	
))))	☐ A sole proprie ☐ A member of a ☐ A partner in a ☐ An officer, din ☐ An owner of a	etor or self-emplo a limited liability o partnership ector, or managin	kruptcy, did you own a business of yed in a trade, profession, or othe company (LLC) or limited liability page executive of a corporation yoting or equity securities of a corporation to Part 12	r activity, either full-ti partnership (LLP)	ime or part-time	siness?
			d fill in the details below for each i	business.		
			Describe the nature of the bus	iness	Employer Identification number	
	Business Name			3 (A. C. 10 (A. A.))	Do not include Social Security n	umber or ITIN.
	Number Street				EIN:	
			Name of accountant or bookke	eper	Dates business existed	
					FromTo	
	City	State ZIP Cod	to a mark a mark mark and and and an arrangement a familiary and		7. Op. 19. 1	
	Business Name	·	Describe the nature of the bus	ness	Employer Identification number Do not include Social Security n	umber or ITIN.
					EIN: _	
	Number Street		Name of accountant or bookke	eper	Dates business existed	
					From To	
	City	State 710 Code				-

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r 1	Sharnell First Name	May Middle Name	lawrence Case number	(if known)
	V = 0		Describe the nature of the business	Employer Identification number
	Business Name			Do not include Social Security number or ITIN. EIN:
	Number Street		Name of accountant or bookkeeper	Dates business existed
	***************************************			From To
	City	State ZIP Code		From To
isti 1 N	tutions, creditors	s, or other parties.	ruptcy, did you give a financial statement to anyone ab	out your business? Include all financial
			Date issued	
	Name		MM / DD / YYYY	
	Number Street			
	*			
	City	State ZIP Code	name.	
7	Sign Below	,		
ans n c	wers are true an connection with a	d correct. I underst	nent of Financial Affairs and any attachments, and I dec tand that making a false statement, concealing propert can result in fines up to \$250,000, or imprisonment for	v. or obtaining money or property by fraud
	- 1	2	<i>(</i>)	
×	<u>Sharl</u> Signature of Debtor		Cuurel *	M
,			Signature of Debtor 2	
		, 7		
	Date <u>10-25-</u>	-	Date	Parkers (Official E
Did		-	Date or Statement of Financial Affairs for Individuals Filing fo	or Bankruptcy (Official Form 107)?
Did Did	you attach addit No Yes you pay or agree	ional pages to You		
Did Did	you attach addit No Yes you pay or agree	e to pay someone v	r Statement of Financial Affairs for Individuals Filing fo	

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Fill in this in	formation to	identify your ca	se:		
Debtor 1	Sharnell First Name	May	Lawrer		
Debtor 2	r nativatile	MICOR	name	Last Name	
(Spouse, if filing)	First Name	Middle	: Name	Last Name	
United States E	Bankruptcy Cou	irt for the: Northeri	n District of Illino	ois	
Case number			·····		tornamed .
(If known)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

this is an

If you are an individual filing under chapter 7, you must fill out this form if:

- m creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: **List Your Creditors Who Have Secured Claims**

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: M & T Bank	☐ Surrender the property.	□ No
Description of Single Family Home	Retain the property and redeem it.	⊻ Yes
property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	☑ No
name:	Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
·	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	ementeng manghahandan kemenahan kepadan kada tahun dan kanaman kepada pelahangan
name:	☐ Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	₩ No
name:	☐ Retain the property and redeem it.	☐ Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	_ , ,,
	Retain the property and [explain]:	

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Doblor	ŧ		

Sharnell	May	Lawrence	Cono numbra (C)
irst Name	Middle Name	Last Name	Case number (If known)

Part 2:	List Your	Unexpired	Personal	Property	Leases
		cxpiicu	· CISCHAI	riopeity	rease

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. 6.365(n)(2)

Describe your unexpired personal proper	rty leases	Will the lease be assumed?
Lessor's name:		™ No
Description of leased property:		☐ Yes
_essor's name:	The second of th	NO
Description of leased property:		Yes
.essor's name;		₩ No
Description of leased property:		☐ Yes
essor's name:		No
Description of leased roperty:		Yes
essor's name:		₩ No
escription of leased roperty:		Yes
essor's name:		The No
escription of leased operty:		Yes
essor's name:		rangementa anatamana da usad kalamana anatampin mininga untuka untuka sa kana kana anata
escription of leased operty:		Yes
etak dari kerangan telam mengapi di kedapatan dari kebapat dan pengan sambahan mengan dan dari kerangan dan da		
3: Sign Below		
der penalty of perjury, I declare that I ha sonal property that is subject to an une	ive indicated my intention about any proper expired lease.	ty of my estate that secures a debt and any
	**O *	
Sharell M Janu	ul *	